Iowa Department of Public Health Division of Behavioral Health and Professional Licensure

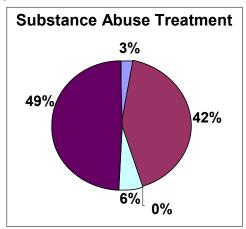
Substance Abuse Treatment and Prevention Overview

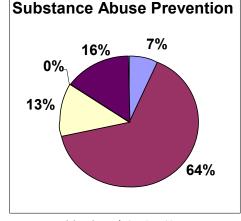
Background

The Iowa Department of Public Health (IDPH) licenses and provides funding to substance abuse treatment programs in the state to ensure a complete continuum of care. Funding is also provided for substance abuse prevention services through direct contracts with local agencies and organizations. A brief description of the substance abuse treatment and prevention system is listed below:

- ☐ 110 treatment programs are licensed by IDPH
- □ 70 programs are under contract with the state to provide substance abuse services
- ☐ 26 of these programs receive IDPH and Medicaid funding
- ☐ 44 of the state contracted programs receive only Medicaid funding
- □ 23 providers receive prevention funding covering 99 counties
- ☐ IDPH funding is released via competitive bid

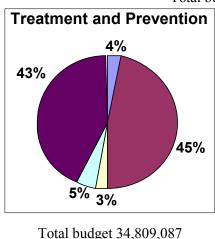
Budget





Total budget \$28,063,483

Total budget \$6,745,605



State Federal Other Gambling Tobacco

*Other category denotes intrastate transfers

Program Highlights

Keg Registration: Department staff works closely with local jurisdictions considering passage of keg registration ordinances. Beer kegs are often a main source of alcohol at teenage parties. Evidence shows keg registration is an effective means for keeping beer out of the hands of underage youth. Currently, 23 Iowa counties have adopted keg registration ordinances with several others considering adoption.

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I-SMART: Iowa was selected as one of eight pilot states for I-SMART, an internet-based client management system for substance abuse treatment providers. I-SMART allows providers to administer, manage and provide cost efficient and quality substance abuse assessment and treatment services. It is a key component to meeting federal requirements of the National Outcome Monitoring System (NOMS). Effective January 1, 2007, all substance abuse treatment providers are submitting clinical and/or demographic data to I-SMART.

Jail-Based Treatment: The department provides funding to jail-based assessment and treatment programs in Polk, Scott, Woodbury and Story counties. Each of the programs provides intense treatment after release as well as case management services to assist parolees in finding jobs and housing. Cost analysis for three of the jail-based treatment programs showed a daily cost of \$30.19, compared to an average daily cost for imprisonment of \$64.02. Follow-up at 12 months showed the following for enrollees: 60.4% were employed full-time, 80.2% had no arrests, and 75.5% were still abstaining. Federal funding, which will end in the fall of 2007, supported this successful effort.

Outcomes

The department contracts with the Iowa Substance Abuse Research and Evaluation Consortium to conduct sampling of clients 6 months after discharge to determine outcomes of treatment. Outcomes for 2006 showed the following data:

- 51.8% reported full-time employment
- 87% reported no arrests
- 39.5% reported no use
- Clients who remain in a continuum of treatment for more than 120 days had the highest rate of abstinence.

The entire 2006 report is available on the department's website at www.idph.state.ia.us.

Challenges

Pseudoephedrine legislation has greatly reduced the number of methamphetamine labs in the state. However, the number of people seeking treatment for use of methamphetamine continues to increase. It is estimated 85% of methamphetamine in Iowa comes from Mexico. 53% of clients seeking treatment for methamphetamine use are females, presenting challenges to the child welfare system.

Waiting lists exist for access to treatment in the state, and depending on the area a client may have to wait from two to four weeks. Waiting lists for women and children programs are much higher and in some cases up to 6 months.

Federal funding for jail-based treatment programs will end in the fall of 2007. It is unlikely these successful programs will continue unless additional funding is secured.

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